Citosi die rapelwork reduction Act of 1995, no persons are required to respond to a conection				
PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009			Docket Number (Optional) 649218008US	
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		049	21800805	
Application Number 10/810,276-Conf	f. #8525	Filed	March 6, 2004	
For METHODS OF TREATING AIRWAYS IN TH	IT LUNC			
FOR METHODS OF TREATING AIRVVATS IN TE	IE LUNG			
Art Unit 3769		Examiner	D. M. Shay	
This is a request under the provisions of 37 CFR 1.136 application.	i(a) to extend the per	riod for filing a reply in	the above identified	t
The requested extension and fee are as follows (check	k time period desired	and enter the approp	riate fee below):	
	<u>Fee</u>	Small Entity Fee	<u> </u>	
X One month (37 CFR 1.17(a)(1))	\$130	\$65	\$ 65.0	00
Two months (37 CFR 1.17(a)(2))	\$490	\$245	\$	
Three months (37 CFR 1.17(a)(3))	\$1110	\$555	\$	_
Four months (37 CFR 1.17(a)(4))	\$1730	\$865	\$	_
Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	\$	
X Applicant claims small entity status. See 37	CFR 1.27.			
X Payment in the amount of the fee is submitte	ed via EFT Account	No. SEA1PIRM.		
Payment by credit card. Form PTO-2038 is	attached.			
The Director has already been authorized to	charge fees in this	application to a Dep	osit Account.	
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to				
Deposit Account Number 50-0665	<u> </u>			
WARNING: Information on this form may become Provide credit card information and authorization	public. Credit card in n on PTO-2038.	formation should not b	e included on this for	rm.
I am the applicant/inventor.				
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).				
x attorney or agent of record. Re	egistration Number	38,264	<u></u>	
attorney or agent under 37 CFI	R 1.34.			
Registration number if acting to	under 37 CFR 1.34			
PIPL		21 A	ugust 2009	
Signature			Date	-
Paul T. Parker		(206)	(206) 359-8000	
Typed or printed name		Teleph	Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the than one signature is required, see below.	entire interest or their rep	resentative(s) are required.	Submit multiple forms if m	nore
Total of 1 forms are sub	nmitted			